

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SHOW-ME POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

2345 Grand Blvd.

Suite 2800

Check if different  
than previously  
reported. (ACC)

Kansas City

MO

64108

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00410621

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Bradshaw, Jean Paul, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Bradshaw, Jean Paul, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

SHOW-ME POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2017

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2017</td></tr></table>	Y	Y	Y	Y	Y	2017						<table><tr><td colspan="5">88841.02</td></tr></table>	88841.02				
Y	Y	Y	Y	Y													
2017																	
88841.02																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">82334.09</td></tr></table>	82334.09															
82334.09																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">47500.00</td></tr></table>	47500.00					<table><tr><td colspan="5">100000.00</td></tr></table>	100000.00									
47500.00																	
100000.00																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">129834.09</td></tr></table>	129834.09					<table><tr><td colspan="5">188841.02</td></tr></table>	188841.02									
129834.09																	
188841.02																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">34072.23</td></tr></table>	34072.23					<table><tr><td colspan="5">93079.16</td></tr></table>	93079.16									
34072.23																	
93079.16																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">95761.86</td></tr></table>	95761.86					<table><tr><td colspan="5">95761.86</td></tr></table>	95761.86									
95761.86																	
95761.86																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">29079.75</td></tr></table>	29079.75															
29079.75																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**SHOW-ME POLITICAL ACTION COMMITTEE**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	1		2	0	1	7		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	7		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	47500.00	100000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	47500.00	100000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	47500.00	100000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	47500.00	100000.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	16072.23	29579.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16072.23	29579.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15500.00	53500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2500.00	10000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34072.23	93079.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34072.23	93079.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	47500.00	100000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47500.00	100000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	16072.23	29579.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16072.23	29579.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 32

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SHOW-ME POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. AKARD STREET  
SUITE 1812

City  
DALLAS

State  
TX

Zip Code  
75202

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
09 / 21 / 2017

Transaction ID : SA11C.4907

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. AKARD STREET  
SUITE 1812

City  
DALLAS

State  
TX

Zip Code  
75202

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
12 / 19 / 2017

Transaction ID : SA11C.4968

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 2000 WESTCHESTER AVENUE

City  
PURCHASE

State  
NY

Zip Code  
10577

FEC ID number of contributing  
federal political committee.

**C** C00478099

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
12 / 29 / 2017

Transaction ID : SA11C.4974

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

7500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 32

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CSX CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City  
WASHINGTON

State  
DC

Zip Code  
20004

FEC ID number of contributing  
federal political committee.

C

C00163832

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 20 / 2017

Transaction ID : SA11C.4969

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 600 CORPORATE PARK DRIVE

City  
ST. LOUIS

State  
MO

Zip Code  
63105

FEC ID number of contributing  
federal political committee.

C

C00219642

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2017

Transaction ID : SA11C.4978

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. FAA MANAGERS ASSOCIATION INC. PAC**

Mailing Address 1015 ATLANTIC BLVD.  
SUITE 245

City  
ATLANTIC BEACH

State  
FL

Zip Code  
32233

FEC ID number of contributing  
federal political committee.

C

C00366070

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2017

Transaction ID : SA11C.4971

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 32  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City  
 MEMPHIS

State  
 TN

Zip Code  
 38120

FEC ID number of contributing  
 federal political committee.

C

C00068692

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2017

Transaction ID : SA11C.4950

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address PO BOX 75000

City  
 DETROIT

State  
 MI

Zip Code  
 48275

FEC ID number of contributing  
 federal political committee.

C

C00046474

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2017

Transaction ID : SA11C.4979

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City  
 WASHINGTON

State  
 DC

Zip Code  
 20005

FEC ID number of contributing  
 federal political committee.

C

C00238725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

Transaction ID : SA11C.4906

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

7000.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 32

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
12 / 19 / 2017

**Transaction ID : SA11C.4967**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 66 CANAL CENTER PLAZA  
SUITE 300

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

FEC ID number of contributing  
federal political committee.

**C** C00089458

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
11 / 13 / 2017

**Transaction ID : SA11C.4934**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NATIONAL TANK TRUCK CARRIERS INC POLITICAL ACTION COMMITTEE**

Mailing Address 950 NORTH GLEBE RD STE 520

City  
ARLINGTON

State  
VA

Zip Code  
22203

FEC ID number of contributing  
federal political committee.

**C** C00188011

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
12 / 29 / 2017

**Transaction ID : SA11C.4972**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

8000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 32

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOIDA-PAC)

Mailing Address PO BOX 1000  
1 NW OOIDA DR.

City  
GRAIN VALLEY

State  
MO

Zip Code  
64029

FEC ID number of contributing  
federal political committee.

**C** C00236778

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2017

**Transaction ID : SA11C.4976**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOIDA-PAC)

Mailing Address PO BOX 1000  
1 NW OOIDA DR.

City  
GRAIN VALLEY

State  
MO

Zip Code  
64029

FEC ID number of contributing  
federal political committee.

**C** C00236778

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2017

**Transaction ID : SA11C.4977**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City  
ARLINGTON

State  
VA

Zip Code  
22209

FEC ID number of contributing  
federal political committee.

**C** C00097568

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 19 / 2017

**Transaction ID : SA11C.4966**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 32  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UNITED PARCEL SERVICE INC. PAC**

Mailing Address 55 GLENLAKE PARKWAY NE

City  
ATLANTA

State  
GA

Zip Code  
30328

FEC ID number of contributing  
federal political committee.

C

C00064766

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 22 / 2017

Transaction ID : SA11C.4880

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

2500.00

**TOTAL** This Period (last page this line number only)..... ►

47500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address P.O. Box 94014

City  
WilmingtonState  
DEZip Code  
19850-5298Purpose of Disbursement  
Credit Card Payment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	1					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.4845

Amount of Each Disbursement this Period

1729.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. House Gift Shop**

Mailing Address Longworth Bldg

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
Constituent gifts

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	4					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.4845.c

Amount of Each Disbursement this Period

1098.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Senate Gift Shop**

Mailing Address East Capitol St. NE &amp; First St SE

City  
WashingtonState  
DCZip Code  
20004Purpose of Disbursement  
Constituent gifts

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	4					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.4845.

Amount of Each Disbursement this Period

360.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1729.88

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 1135 Longworth

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
taxi

002

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4845.1

Amount of Each Disbursement this Period

62.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Lounge**

Mailing Address 229 Pennsylvania Ave SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Restaurant charge

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4845.3

Amount of Each Disbursement this Period

63.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Depot Deli**

Mailing Address 101 N Railroad St

City  
ShenandoahState  
IAZip Code  
51601Purpose of Disbursement  
Catering

007

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4845.

Amount of Each Disbursement this Period

122.59

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Casey's General Store**

Mailing Address 912 Walnut St

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
travel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	7		

FEC Identification Number

C

**Transaction ID : SB21B.4845.!**

Amount of Each Disbursement this Period

6.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Torrey Pines**

Mailing Address 20286 US-59

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Travel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	7		

FEC Identification Number

C

**Transaction ID : SB21B.4845.6**

Amount of Each Disbursement this Period

16.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 94014

City  
WilmingtonState  
DEZip Code  
19850-5298Purpose of Disbursement  
Credit Card Payment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	3			2	0	1	7		

FEC Identification Number

C

**Transaction ID : SB21B.5003**

Amount of Each Disbursement this Period

998.38

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

998.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Torrey Pines**

Mailing Address 20286 US-59

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	6				2	4						2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.5003.1

Amount of Each Disbursement this Period

137.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Phillips 66**

Mailing Address 19206 STATE HWY O

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Aviation fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	6				2	5						2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.5003.1

Amount of Each Disbursement this Period

226.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Phillips 66**

Mailing Address 19206 STATE HWY O

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Aviation fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	6				2	5						2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.5003.

Amount of Each Disbursement this Period

271.84

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. House Gift Shop**

Mailing Address Longworth Bldg

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
Constituent gifts

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.5003.1

Amount of Each Disbursement this Period

58.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Hamilton**

Mailing Address 600 14th St NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Restaurant meals

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.5003.4

Amount of Each Disbursement this Period

304.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 94014

City  
WilmingtonState  
DEZip Code  
19850-5298Purpose of Disbursement  
Credit card payment

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4885

Amount of Each Disbursement this Period

1437.07

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1437.07



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Paygov.us**

Mailing Address 5144 E Stop 11 Rd.

City  
IndianapolisState  
INZip Code  
46237Purpose of Disbursement  
Constituent funeral

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	3					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.4885.1

Amount of Each Disbursement this Period

226.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CPJs Restaurant**

Mailing Address 1321 Floyd Ave

City  
RomeState  
NYZip Code  
13440Purpose of Disbursement  
Meals

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	4					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.4885.1

Amount of Each Disbursement this Period

180.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jet Air**

Mailing Address 58 IL-164

City  
GalesburgState  
ILZip Code  
61401Purpose of Disbursement  
Aviation fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	7					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.4885.

Amount of Each Disbursement this Period

268.73

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Holiday Inn Express**

Mailing Address 45805 Marketplace Blvd

City  
ChesterfieldState  
MIZip Code  
48051

Purpose of Disbursement

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				2	0						2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.4885.1

Amount of Each Disbursement this Period

294.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Casey's General Store**

Mailing Address 912 Walnut St

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				0	5						2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.4885.4

Amount of Each Disbursement this Period

185.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 1135 Longworth

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
Taxi

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				0	4						2	0	1	7

FEC Identification Number

C

Transaction ID : SB21B.4885.

Amount of Each Disbursement this Period

10.16

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Casey's General Store**

Mailing Address 912 Walnut St

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4885.4

Amount of Each Disbursement this Period

80.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Hamilton**

Mailing Address 600 14th St NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Restaurant meals

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	9			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4885.7

Amount of Each Disbursement this Period

190.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 94014

City  
WilmingtonState  
DEZip Code  
19850-5298Purpose of Disbursement  
Credit card payment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	3			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4912

Amount of Each Disbursement this Period

343.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

343.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Eldorado Coffee Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2017

Mailing Address 345 N Virginia St

FEC Identification Number

**C****Transaction ID : SB21B.4912.1**

Amount of Each Disbursement this Period

118.93

☒ Memo ItemCity  
RenoState  
NVZip Code  
89501Purpose of Disbursement  
Meal

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Harpos**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2017

Mailing Address 29 S 10th St

FEC Identification Number

**C****Transaction ID : SB21B.4912.1**

Amount of Each Disbursement this Period

115.29

☒ Memo ItemCity  
ColumbiaState  
MOZip Code  
65201Purpose of Disbursement  
Meal

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Uber**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2017

Mailing Address 1135 Longworth

FEC Identification Number

**C****Transaction ID : SB21B.4912.**

Amount of Each Disbursement this Period

68.74

☒ Memo ItemCity  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
Taxi

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HyVee**

Mailing Address 3100 Broadway

City  
ColumbiaState  
MOZip Code  
65203Purpose of Disbursement  
Supplies

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4912.

Amount of Each Disbursement this Period

40.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address P.O. Box 94014

City  
WilmingtonState  
DEZip Code  
19850-5298Purpose of Disbursement  
Credit card payment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	7			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4924

Amount of Each Disbursement this Period

1852.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 1135 Longworth

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
Taxi

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4924.

Amount of Each Disbursement this Period

7.59

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1852.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Torrey Pines**

Mailing Address 20286 US-59

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	1			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4924.1

Amount of Each Disbursement this Period

125.33

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. USHIP**

Mailing Address 205 E Riverside Dr

City  
AustinState  
TXZip Code  
78704Purpose of Disbursement  
Supplies

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4924.2

Amount of Each Disbursement this Period

403.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Hamilton**

Mailing Address 600 14th St NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Restaurant meals

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4924.3

Amount of Each Disbursement this Period

176.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. The Hamilton**

Mailing Address 600 14th St NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Restaurant meals

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				10				2017					

FEC Identification Number

C

Transaction ID : SB21B.4924.4

Amount of Each Disbursement this Period

310.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Torrey Pines**

Mailing Address 20286 US-59

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				19				2017					

FEC Identification Number

C

Transaction ID : SB21B.4924.5

Amount of Each Disbursement this Period

29.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 94014

City  
WilmingtonState  
DEZip Code  
19850-5298Purpose of Disbursement  
Membership fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				13				2017					

FEC Identification Number

C

Transaction ID : SB21B.4924.

Amount of Each Disbursement this Period

99.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address P.O. Box 94014

City  
WilmingtonState  
DEZip Code  
19850-5298Purpose of Disbursement  
Credit card payment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				01				2017					

FEC Identification Number

C

Transaction ID : SB21B.4939

Amount of Each Disbursement this Period

1076.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 1135 Longworth

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
Taxi

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				01				2017					

FEC Identification Number

C

Transaction ID : SB21B.4939.c

Amount of Each Disbursement this Period

29.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. MFA Oil**

Mailing Address US-136 &amp; S 1st St

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Fuel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				04				2017					

FEC Identification Number

C

Transaction ID : SB21B.4939.

Amount of Each Disbursement this Period

45.87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1076.26



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Torrey Pines**

Mailing Address 20286 US-59

City  
TarkioState  
MOZip Code  
64491Purpose of Disbursement  
Aviation Fuel

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4939.1

Amount of Each Disbursement this Period

169.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nellis Officers Club**

Mailing Address 5871 Fitzgerald Blvd

City  
Nellis AFBState  
NVZip Code  
89191Purpose of Disbursement  
Meal

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	1			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4939.3

Amount of Each Disbursement this Period

184.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Enterprise Rent a Car**

Mailing Address 600 Terminal Dr Ste 404

City  
Fort LauderdaleState  
FLZip Code  
33315Purpose of Disbursement  
Automobile rental

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	0			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4939.

Amount of Each Disbursement this Period

485.36

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US POSTMASTER**

Mailing Address 300 West Pershing Road

City  
Kansas CityState  
MOZip Code  
64108Purpose of Disbursement  
Postage

006

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	7			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4939.!

Amount of Each Disbursement this Period

23.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tanners Bar & Grill**

Mailing Address 2701 Running Horse Rd

City  
Platte CityState  
MOZip Code  
64079Purpose of Disbursement  
Restaurant meals

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4939.6

Amount of Each Disbursement this Period

137.33

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GULA GRAHAM GROUP**Mailing Address 700 12th St. NW  
Ste 700City  
Washington, D.C.State  
DCZip Code  
20005Purpose of Disbursement  
Fundraising Management Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	3			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4870

Amount of Each Disbursement this Period

7010.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7010.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Hollstrom, Kirsten, , ,**

Mailing Address 4312 E 110th Street

City  
Kansas CityState  
MOZip Code  
64137Purpose of Disbursement  
Reimbursement for attendance at FEC webinar

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼001  
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2017

FEC Identification Number

C Transaction ID : SB21B.4864

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hollstrom, Kirsten, , ,**

Mailing Address 4312 E 110th Street

City  
Kansas CityState  
MOZip Code  
64137Purpose of Disbursement  
Admin assistance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼001  
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

FEC Identification Number

C Transaction ID : SB21B.4964

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lathrop Gage**

Mailing Address 2345 Grand Blvd

City  
Kansas CityState  
MOZip Code  
64108Purpose of Disbursement  
Professional fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼001  
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

FEC Identification Number

C Transaction ID : SB21B.4962

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1625.00

16072.23

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DAVID ROUZER FOR CONGRESS**

Mailing Address PO BOX 3142

City  
WILMINGTONState  
NCZip Code  
28406Purpose of Disbursement  
Contribution

011

Candidate Name

**ROUZER, DAVID CHESTON, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	7		

FEC Identification Number

**C** C00501643**Transaction ID : SB23.4909**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GIBBS FOR CONGRESS**

Mailing Address 13871 TR 473

City  
LAKEVILLEState  
OHZip Code  
44638Purpose of Disbursement  
Contribution

011

Candidate Name

**GIBBS, ROBERT, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	6			2	0	1	7		

FEC Identification Number

**C** C00466516**Transaction ID : SB23.4954**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARTHA ROBY FOR CONGRESS**

Mailing Address PO BOX 195

City  
MONTGOMERYState  
ALZip Code  
36101

Purpose of Disbursement

011

Candidate Name

**ROBY, MARTHA, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	1	7		

FEC Identification Number

**C** C00462143**Transaction ID : SB23.4881**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7000.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MCSALLY FOR CONGRESS**

Mailing Address PO BOX 19128

City  
TUCSONState  
AZZip Code  
85731Purpose of Disbursement  
Contribution

011

Candidate Name

**MCSALLY, MARTHA, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2017

FEC Identification Number

**C** C00512236**Transaction ID : SB23.4980**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE BOST FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 1212

City  
MURPHYSBOROState  
ILZip Code  
62966Purpose of Disbursement  
Contribution

011

Candidate Name

**BOST, MICHAEL, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2017

FEC Identification Number

**C** H4IL12060**Transaction ID : SB23.4965**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PETE STAUBER FOR CONGRESS VOLUNTEER COMMITTEE**Mailing Address 23 CENTRAL ENTRANCE  
BOX 333City  
DULUTHState  
MNZip Code  
55811Purpose of Disbursement  
Contribution

011

Candidate Name

**STAUBER, PETE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2017

FEC Identification Number

**C** C00650697**Transaction ID : SB23.4877**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TED BUDD FOR CONGRESS**

Mailing Address PO BOX 97127

City  
RALEIGHState  
NCZip Code  
27624Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**BUDD, THEODORE P MR., , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	7		

FEC Identification Number

**C** C00614776**Transaction ID : SB23.4936**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

**TOTAL** This Period (last page this line number only).....▶

15500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Owner Operator Independent Drivers Assn Inc**

Mailing Address PO Box 1000 1 NW Ooida Drive

City  
Grain ValleyState  
MOZip Code  
64029Purpose of Disbursement  
Return of check erroneously deposited

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2017

FEC Identification Number

**C****Transaction ID : SB29.4983**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00

2500.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 32 OF 32

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SHOW-ME POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SMART MEDIA GROUP LLC**

Nature of Debt (Purpose):

Fund Raising and Marketing Expenses

Mailing Address 814 King Street  
Suite 400City  
AlexandriaState  
VAZip Code  
22314

Outstanding Balance Beginning This Period

29079.75

Transaction ID : SD10.4105

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

29079.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

29079.75

2) **TOTALS** This Period (last page this line number only)..... ►

29079.75

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

29079.75